Approved for use through 9/30/98. OMB 0651-0632
Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATTERN A DEPARTMENT OF COMMERCE

DATE: The Property of the Property PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY (Out m f) OR (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE OT CHE LIGHT TOTAL CLAIMS OR (37 CFR 1.16(c)) mious 20 = 0-INDEPENDENT CLAIMS OR minus 3 . 0 OR MULTIPLE DEPENDENT CLAIM PRESENT OT OPR LIGOD = OR # If the difference in column 1 is less then zero, enter "O" in column 2 TOTAL OR TOTAL 160 CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY (Column 2) OR (Column 3) SMALL ENTITY CLAIMS HIGHEST REMAINING ADDI-NUMBER PRESENT ADDI-**AFTER** RATE TIONAL PREVIOUSLY RATE TIONAL EXTRA-AMENDMENT FEE PAID FOR FEE Total O7 CFR 1.16(e)) Minus OR Independent 9 ... Minus OR Ø7 GFR 1.16(b)) 3 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR AMENDMENT BUILD (37 CFR 1.16(d)) OR 03 (Column 1) TOTAL. TOTAL OR (Column 2) (Cotumn 3) ADDIT, FEE ADDIT. FEE CLAIMS HIGHEST REMAINING ADDI-ADDI-NUMBER PRESENT RATE **AFTER** TIONAL **PREVIOUSLY** RATE TIONAL **EXTRA** MENDMENT FEE PAID FOR FEE Total 07 OFR 1.16(c)) Minus OR Independent *** OR Minus O. (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL (Column 1) OR TOTAL (Column 2) ADDIT. FEE (Column 3) ADDIT. FEE **CLAIMS** AMENDMENT C HIGHEST REMAINING ADDI-ADDI-NUMBER PRESENT AFTER RATE TIONAL PREVIOUSLY RATE TIONAL **EXTRA** AMENDMENT FEE PAID FOR FEE Total Minus OR x \$ Independent OR Minus (D) CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.1640) OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". TOTAL TOTAL. OR ADDIT. FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paul For Total or Independent) is the highest number found in the appropriate box in column 1. surdea Hour Statement: This form is estimated to take 0.7 hours to complete. Time will vary depending upon the needs of the individual case. Mice, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissions of Send Total Sen

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09/280 435

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	370.00	OR	BASIC F	40.00
TOTAL CHARGEABLE CLAIMS			minus 20=					X\$ 9=		OŘ	X\$18=	
INDEPENDENT CLAIMS			minus 3 = *		*					OR	X84=	
MUL	TIPLE DEPEN	DENT CLAIM P	RESENT					+140=			20-	
* If t	he differen		less than zero, enter "0" in columi			olumn 2		TOTAL		OR	TOTAL	\
	. CI	I AIMS AS A	MENDED - PART II					TOTAL		OR	OTHER	THAN
3/10/04 (Column 1)			(Column 2) (Col			(Column 3)		SMALLE	ENTITY	OR	SMALL E	
	Ü	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 16	Minus	** 4	10	=		X\$ 9=		OR	X\$18=	
	Independent	* <u>(e</u>	Minus	***	9			X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	CLAIM]	+140=	-	OR	+280=	
								TOTAL ADDIT. FEE			TOTAL ADDIT, FEE	-^
(Column 1) (Column 2) (Column 3)								ADDII. FEE			ADDII. I EE	
	A/19/04	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* <i>13</i> ,	Minus	** <i>H</i>	0	=]	X\$ 9=		OR	X\$18=	
	Independent	<u>* 4</u>	Minus	*** (9	<u> </u> =	₽Ì	X42=		OR	X84=	
T	FIRST PRESE	NTATION OF MU	JUIPLE DEF	PENDEN	CLAIM		J	+140=		OR	+280=	
							l	TOTAL			TOTAL	_
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		1	ADDIT. FEE	
		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST	PRESENT EXTRA] [RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		┚╽	+140=			+280=	
		mn 1 is less than th						TOTAL	·	OR	TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FE											